

**From:** "Crozer, William F. EOP/WHO" <[William.F.Crozer@who.eop.gov](mailto:William.F.Crozer@who.eop.gov)>

**Date:** April 2, 2019 at 5:45:34 PM CDT

**To:** Undisclosed recipients;;

**Subject: WH IGA Briefing Call (REMINDER): Reforming America's Healthcare System Through Choice and Competition**



A reminder for the briefing call with Senior White House Officials on Thursday, April 4, at 3:00PM ET. The purpose of the call is to provide a briefing on the Administration's policies and priorities in reforming America's health care system through choice and competition. **You can find additional information on these policies and priorities below.**

**Briefing Call: Reforming America's Healthcare System Through Choice and Competition**

- **Date:** Thursday, April 4
- **Time:** 3:00 PM ET

- **Call-In Information:** [RSVP HERE](#) (you must register to receive unique dial-in instructions)
- **Note:** This call is closed to the press. The invitation is non-transferable.

Thank you,

**The White House Office of Intergovernmental Affairs**

William F. Crozer  
Special Assistant to the President/Deputy Director  
White House Office of Intergovernmental Affairs  
O: 202-456-8491 | C: 202-881-8545 | E: [William.F.Crozer@who.eop.gov](mailto:William.F.Crozer@who.eop.gov)

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## **Call Background – Reforming America’s Healthcare System Through Choice and Competition**

### **Executive Order 13813**

Through [Executive Order 13813](#), President Donald J. Trump directed the Administration to facilitate the development and operation of a health care system that provides high-quality care at affordable prices for the American people by promoting choice and competition. Most recently, the Administration issued a comprehensive report (outlined below) analyzing health care markets and the ability of consumers to control their health care decisions. To date, the Trump Administration has already executed to promote choice and competition. In June 2018, the Administration made it easier for employers, including sole proprietors, to band together to offer coverage to their workers by opening up a new pathway for forming an Association Health Plan. In August 2018, the Administration opened up consumers’ ability to purchase short-term plans, which are not subject to Obamacare rules, by extending the contract period to 364 days and allowing a plan to be renewed for up to three years. States can increase the availability of much more flexible and affordable coverage for millions of people by allowing their residents to fully benefit from AHPs and short-term plans.

In December, the Administration released a bold and unprecedented report, ***Improving America’s Health Care System Through Choice and Competition***, on federal and state policies that limit choice, competition, and innovation, along with dozens of recommended reforms. Many of these reforms involve state action to repeal or scale back policies,

like certificate-of-need laws, narrow scope of practice laws, ~~or~~ restrictive supervisory requirements, and restrictions on telehealth, which tend to protect incumbents from competition and innovation and which harm consumers with higher prices and reduced choices. The Administration continues and looks forward to working with states and supporting their efforts to increase health care choice and competition.

### **Report – Reform America’s Healthcare System through Choice and Competition**

This report describes the influence of state and federal laws, regulations, guidance, and policies on choice and competition in health care markets and identifies actions that states or the Federal Government could take to develop a better functioning health care market. As health care spending continues to rise, Americans are not receiving the commensurate benefit of living longer, healthier lives. Health care bills are too complex, choices are too restrained, and insurance premiums and out-of-pocket costs are climbing faster than wages and tax revenue. Health care markets could work more efficiently and Americans could receive more effective, high-value care if we remove and revise certain federal and state regulations and policies that inhibit choice and competition.

You can find the full report and executive summary:

- Reform America’s Healthcare System through Choice and Competition ([executive summary](#))
- Reform America’s Healthcare System through Choice and Competition ([full report](#), 120 pages)
- *Wall Street Journal* Editorial Board: “Trump’s Health-Care Progress. The Administration is improving the individual market by expanding insurance choices.” Full article is [here](#).

### **Short-Term Limited Duration Health Insurance (STLDI)**

In August 2018, the Departments of HHS, the Treasury, and Labor finalized a rule to expand Americans’ ability to purchase short-term, limited-duration insurance—coverage for which premiums are generally much more affordable than Affordable Care Act (ACA) plans. Millions of Americans, including middle-class families who cannot afford ACA plans, will benefit from the additional choice and competition resulting from this reform.

- More information [here](#) including press release, final rule, and fact sheet.
- Op-ed in the *Washington Examiner*, “Trump’s new short-term health insurance rule is a major victory for young people and working families.” Op-Ed can be found [here](#).

### **Association Health Plans (AHPs)**

In June 2018, the Labor Department finalized a rule to expand the ability of employers, including sole proprietors without common law employees,

to join together and offer health coverage through Association Health Plans. For many employers, employees, and their families, these employee benefit plans will offer greater flexibility and more affordable benefits.

- More information including overview, FAQ, and final here can be found [here](#).
- Op-Ed from Secretary of Labor Alexander Acosta can be found [here](#).

### **State Waiver Flexibilities (Medicaid and Insurance Markets)**

- **Recent Op-Ed from CMS Administrator Seema Verma** – You might find this recent Op-Ed from CMS Administrator Verma in the *Washington Times* of interest, “Helping states develop innovative alternatives to Obamacare. State Relief and Empowerment Waivers program broadens health care choices.” Full Op-Ed [here](#).
- **CMS Administrator Discusses Initiatives to Strengthen Health Insurance Markets:** New Policies Empower States and Deliver Flexibility to Make Health Insurance More Affordable and More Accessible for Millions of Unsubsidized Americans. More information can be found [here](#) including press release, guidance, and a fact sheet. You can find a helpful slide deck [here](#) (*Overview of 1332 guidance for State Relief and Empowerment Waivers November 2018*).
- **1115 Community Engagement Initiative** – On January 11, 2018, CMS issued new policy guidance to support states in their efforts to improve Medicaid enrollee health and well-being through incentivizing participation in community engagement activities. This guidance will assist states in pursuing Medicaid section 1115(a) demonstration authority to test incentives that make participation in work or other community engagement a requirement for continued Medicaid eligibility or coverage for certain adult Medicaid beneficiaries. More information can be found [here](#).
- **CMS Announces New Medicaid Demonstration Opportunity to Expand Mental Health Treatment Services.** CMS letter to State Medicaid Directors outlines new opportunities for states to receive payment for residential treatment services. More information can be found [here](#) including press release and additional information.

### **Health Reimbursement Arrangements (HRAs)**

In October 2018, the Departments of HHS, the Treasury, and Labor proposed a rule that would provide employers with significant new flexibility in how they fund health coverage through Health Reimbursement Arrangements (HRAs). If finalized, this flexibility would empower individuals to take greater control over what health insurance benefits they receive. The Treasury estimates that more than 10 million employees would benefit from this change within the next decade.

- More information can be found [here](#) including press release, proposed regulation, and fact sheet.
- Op-Ed from Secretary of Labor Alexander Acosta, Secretary of Health and Human Services Alex Azar, and Secretary of Treasury Steve Mnuchin can be found [here](#).

### **Drug Pricing**

In May 2018, HHS released “American Patients First,” a historic blueprint for actions to bring down the high price of drugs and reduce out-of-pocket costs. HHS has taken a number of actions that were laid out in the blueprint to empower consumers and promote competition, building on accomplishments such as the Food and Drug Administration’s record pace of generic drug approvals. More information below.

- CPI for Prescription Drugs
- New Generic Drug Approvals by the FDA
- Prescription Drug Patent Expirations, do not explain the surge in generic drug approvals
- Blueprint to Lower Drug Prices ([fact sheet](#))
- American Patients First ([full blueprint](#), 44 pages)
- 100 Days of Results: President Trump’s American Patients First Blueprint ([fact sheet](#))
- Report on 100 Days of Action on the American Patient First Blueprint ([full report](#), 5 pages)
- CEA Report: The Administration’s FDA Reforms and Reduced Biopharmaceutical Drug Prices ([full report](#), 19 pages)